10/030,033

BEST AVAILABLE COPY

PTC/S8/06 (08-03)
Approved for use through 7/31/2006, OMB 0651-0032
rit and Tradensirk Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number										
		Subst	tute for Form P	TO-875				<u> </u>		
CLAIMS AS FILED (Cotumn I)			- PART I (Cohmun 2)			SMALL	ENTITY	OR	OTHER THAN SMALL ENTITY	
FOR NUMBE BASIC FEE		ER FILED MIL		48ER EXTRA		RATE	FEE]	RATE	FEE
(ST CFR 1.16(a)) YOTAL (CLAIMS					1			OR		,
(37 CFR 1,15(c))		minus 20 °				25_ •		OR.	X E	
PACE 1.15(b)		erinus 3 a				15				
MULTIPLE DEPENDENT CLASH PRESENT (37 CFR 1,18(6))					1		 	OR	X 8	
"If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL		OR	+1	
•						IOIAL		OR	TOTAL	
CLAIMS AS AMENDED - PART (I										
11-11-6	(Cotumn 1)		(Column 2)	(Column 3)		SMALL	ENTITY	OR	OTHER SMALL	THAN ENTITY
	REMAINING AFTER LIKENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL
O (ta cus i ratio)	20	Minus	30	10	1	xs -	765			FEE
Z Independent •	3	Minus	- 3	10				OR	X 8e	
FIRST PRESIDITATION OF MULTIPLE DEPRESIDENT CLAIM (37 OFR 1.18(d))								OR	X %	
, 11 ettra Chias pei 11-8						TOTAL		OR	+= =	
12/22/1						ADD'L FEE		OR	TOTAL ADD'L FEE	
1423/09	Column 1)		(Column 2)	(Caluan 3)						_ ; _
	REMAINING AFTER MENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
O CLOUFTINGS	22	Minus	30	*		X 8 .		œ.	7 E	FEE
Z Independent	3	Minus	" "	• ;	l	X 8 .				
FRIST PRESENTATION OF MALTIPLE DEPONDENT GLAIM (2) CFR 1.10(0)								OR	X & •	
					Ł	TOTAL ADD'L FEE	——	OR I	TOTAL	
15/21/ac								OR	ADDL FEE	
	CLAIMS I		HIGHEST	(Column 3)	ſ		 ,	ſ		
<u> </u>	emaring After Menoment		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
C CALCULATION AND AND AND AND AND AND AND AND AND AN	21	Minus	30	. 0	ſ	X 5 =	1	ca l	X 1 -	
Ch chairman	3	Minus	-3	. 0	ı		75	OR	× 1 =	
FIRST PRESENTATION OF MULTIPLE DEPONDENT CLAIM (27 CFR 1,19(4))						7	-			
						+s +/		OR [TOTAL	
* If the entry in column	n 1 in tess than	the entry	in column 2. write	"T in cohemn ?		ADD'L FEE		OR	ADD'T FEE	
If the entry in column 1 is tess than the entry in column 2, write "I" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".										

"If the "Highest Number Previously Paid For" (I This SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to like (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. The collection is estimated to take 12 minutes to complete from the including pathering, preparing, and submitting the completed application form to the USPTO. Thus will vary depending upon the including case. Any comments on the amount of time you require to complete this form subtice suggestions for rectoing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Bax 4450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.